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Pages	Including this Cover Page: (2)						
Re:	US Patent Application No.: Filing Date: First Named Inventor: Art Unit:	2003					
	Examiner Name:	Weddington, K	Cevin E.				

Message:

Dear Examiner Kevin:

Attached, please find an executed Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address with respect to the above-referenced matter.

Please update your record accordingly. If you have any questions, please feel free to contact me.

Thank you.

Don D. Cha

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REVOCATION OF POWER OF ATTORNEY WITH **NEW POWER OF ATTORNEY** AND CHANGE OF CORRESPONDENCE ADDRESS **Application Number** 10/669,251 Filing Date September 25, 2003 First Named Inventor Leland Shapiro Art Unit 1614 **Examiner Name** Weddington, Kevin E. Attorney Docket Number SHAP-000120 (FORMERLY 7049795003)

I hereby revoke all previous powers of attorney given in the above-identified application.										
Luetena	зуоке ан ри	3VIOUS DOWEIS OF all	Omey given in a	ne apove-idend	Hed applic	ation.				
A Power of Attorney is submitted herewith.										
OR										
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Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)										
		SIGNATURE	of Applicant or	Assignee of Re	cord					
Signature	Loley	nd bleggers								
Name	Leland:	Shapiro								
Date	2/5/	/ 0 7		Telephone (7	720) 339-7	207				
NOTE: Signature signature is requ	es of all the inven ired, see below",	tors or assignees of record of t	he entire Interest or their	representative(s) are re	equired. Submit	multiple forms if more than one				
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This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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